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PATENT  
450101-02195

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Tatsushi NASHIDA et al.  
Serial No. : 09/601,161  
Filed : September 6, 2000  
For : INFORMATION PROVIDING APPARATUS AND INFORMATION  
PROVIDING METHOD  
Art Unit : 2713

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New York, New York 10151  
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Name of Applicant, Assignee or  
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Signature

October 3, 2000

Date of Signature

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REQUEST FOR CORRECTED FILING RECEIPT

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Sir:

This is a Request to correct the Filing Receipt issued  
in the above-identified application.

Under Applicant(s):

Please insert --MOTOKI KOBAYASHI, CHIBA, JAPAN-- as a  
third applicant.

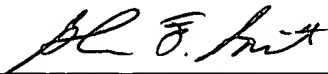
The foregoing changes are needed to correct inadvertent errors, as evidenced by the Declaration submitted with the patent application. A copy of the Filing Receipt with the requested correction(s) noted thereon in red ink is enclosed.

The issuance of a corrected Filing Receipt is respectfully requested.

Please charge any fees required for this correction or credit any overpayment to Deposit Account No. 50-0320.

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP  
Attorneys for Applicants

By:   
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/601,161	09/06/2000	2713	970	450101-02195	35	10	2

William S Frommer  
Frommer Lawrence & Haug  
745 Fifth Avenue  
New York, NY 10151

## FILING RECEIPT



\*OC00000005409747\*

Date Mailed: 09/19/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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Takeshi Hashimoto, Tokyo, JAPAN;  
MOTOHI KOBAYASHI, CHIBA, JAPAN

## Continuing Data as Claimed by Applicant

THIS APPLICATION IS A 371 OF PCT/JP99/06708 11/30/1999

## Foreign Applications

JAPAN P10-338632 11/30/1998

If Required, Foreign Filing License Granted 09/19/2000

## Title

Information providing device and method

## Preliminary Class

348

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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/601,161	<b>FILING DATE</b> 09/06/2000 <b>RULE</b> -	<b>CLASS</b> 348	<b>GROUP ART UNIT</b> 2713	<b>ATTORNEY DOCKET NO.</b> 450101-02195
<b>APPLICANTS</b> Tatsushi Nashida, Kanagawa, JAPAN; Takeshi Hashimoto, Tokyo, JAPAN; Motoki Kobayashi, Chiba, JAPAN;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/JP99/06708 11/30/1999				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN P10-338632 11/30/1998				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 09/19/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 35	<b>TOTAL CLAIMS</b> 10
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> William S Frommer Frommer Lawrence & Haug 745 Fifth Avenue New York ,NY 10151				
<b>TITLE</b> Information providing device and method				
<b>FILING FEE RECEIVED</b> 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	